



Product Order Form

810 River Avenue
Suite 250 Riverfront Place
Pittsburgh, PA 15212
(Ph.) 412.322.5680 • (Fax) 412.322. 5686

Bill To:

Shipping Address:

** Contact:

** Phone#:

** Contact:

**Phone #:

Freight Shipping Instructions

Freight charges will be billed to customer's account. Order is shipped "best way" and actual freight charges are added to bottom of invoice.
NOTE:(Free freight to DC, DE, IN, MD, MI, NJ, OH, PA, VA, WV and parts of IL, KY, NC and NY compliments of Pitt Ohio Express.)

To better assist your shipping needs please mark services that apply to you. (Additional charges will apply.)

Do you have a shipping Dock? Y_____ N_____ If not you will need a lift gate.

Will driver have to unload the truck? Y_____ N_____ Do you need a phone call before delivery? Y_____ N_____ (A \$30.00 charge may apply)

If all product is not in stock, is a partial shipment with backorder ok? Y_____ N_____ Partial shipments will likely incur additional freight charges.

Special Instructions:

Payment Method

Visa _____ MC _____ Discover _____ American Express _____ Cardholder Name _____

Address as it appears on credit card: _____

Card # _____ Exp. Date _____

Pay by Check _____ Check # _____ Pay by Invoice (Net 30 Days) _____

Item #	Description	Unit Cost	Qty.	Total
9350CFK	Graco Pack n' Play	49.99		
HSS07	Halo Sleep Sack	19.99		
SSCS07	Safe Sleep Crib Sheet with Message	5.00		
RP07	Respironic Pacifier	1.50		
SSSK07	Safe Sleep Survival Kit (includes all of the above & safe sleep material)	69.99		
PFM08	Photo Frame Magnet	.75		
Small Order Surcharge, Add 10% to orders of less than 10 units.				
**7% Pennsylvania Sales Tax, unless tax-exempt number is provided. EIN: _____				
			Freight Shipping Charges	
			TOTAL	

NOTE: Freight charges also apply and will be charged on the invoice in addition to this total.

** Must have information to process order.

Order Authorized by: _____ Print name: _____